

PROVIDER BULLETIN

No. 16-14

DATE: May 27, 2016

TO: Medicaid Providers

FROM: Calder Lynch, Director

Division of Medicaid & Long-Term Care

BY: Tammy Usrey, Program Manager II, Delivery Systems

Division of Medicaid & Long-Term Care

RE: Heritage Health Plans Provider Credentialing and Contracting Information

Please share this important information with administrative, clinical, and billing staff.

On April 15, 2016, the Department of Health and Human Services' Division of Medicaid and Long-Term Care (MLTC) announced the signing of contracts for Heritage Health, the new, integrated, Medicaid managed care program. Heritage Health will combine Nebraska's current physical health, behavioral health, and pharmacy programs into a single comprehensive and coordinated delivery system for Nebraska's Medicaid and Children's Health Insurance Program (CHIP) enrollees. The three health plans selected will operate statewide beginning January 1, 2017.

The three contracted Heritage Health plans are:

- Nebraska Total Care (Centene)
- UnitedHealthcare Community Plan
- WellCare of Nebraska

Heritage Health will expand the managed care delivery system to individuals receiving long-term services and supports (LTSS) currently excluded from the physical health managed care program. This includes clients receiving LTSS through the home and community-based services waiver programs, including the aged and disabled waiver, the developmental disabilities waiver, the traumatic brain injury waiver, and clients receiving State Plan personal assistance service. Clients living in nursing facilities at a custodial level of care and intermediate care facilities for the developmentally disabled (ICF-DD) will also be included. While these individuals will have their physical, behavioral, and pharmacy health services coordinated by their Heritage Health plan, the administration of their LTSS will not change and will continue to be reimbursed through the State administered fee-for-service program.

In addition to the LTSS services discussed above, dental services, non-emergency transportation, and school-based services are not included in the Heritage Health managed care program and will continue to be reimbursed through the fee-for-service program at this time.

Medicaid-enrolled providers of physical health, behavioral health, and pharmacy services covered by Heritage Health are encouraged to contact each Heritage Health plan regarding network participation.

While each health plan maintains its own credentialing process, all three plans will accept provider credentialing information via the Council for Affordable Quality Healthcare (CAQH) system. CAQH is a national nonprofit organization dedicated to reducing the administrative burden of provider credentialing. Below is contact information for CAQH assistance. Heritage Health Plans are required to provide decisions on credentialing applications within 30 days of receipt of a complete application.

Council for Affordable Quality Healthcare

Phone: 1-888-599-1771 Online: http://www.caqh.org

Providers enrolled with CAQH will need to ensure that their profile is up to date and has been attested to in the last six months in order to expedite the credentialing process. Additionally, each Heritage Health plan will need to be selected as an approved payer in order for the plans to access the CAQH profile.

The contact information for each health plan is listed below.

Nebraska Total Care (Centene):

Phone: 1-855-688-6589

Fax: 1-844-536-2997

Email: networkmanagement@nebraskatotalcare.com

Mail: Nebraska Total Care Network Development: NE 233 S. 13th St., 11th Floor Lincoln, Nebraska 68508

Pharmacy:

Phone: 1-877-935-8026

Email: pharmacynetworkteam@usscript.com

UnitedHealthcare Community Plan:

Phone: 1-877-842-3210

To initiate credentialing for UnitedHealthcare Community Plan Provider Network, please call the automated service line at 1-877-842-3210. You will need to provide your tax identification number (TIN) or social security number (SSN), and then follow the prompts: Health Care Professional Services > Credentialing > Request for Participation.

Contracting questions may be directed to the addresses below. Mailboxes are reviewed daily.

For Physical Health Provider questions please contact 1-866-331-2243 or email the Nebraska contracting team mailbox at Nebraska PR Team@uhc.com. For

more information regarding the contracting process you can also visit www.unitedhealthcareonline.com.

For Behavioral Health Provider questions please contact 1-877-614-0484 or email the Nebraska contracting team mailbox at neherhlth@optum.com. For more information regarding the contracting process you can also visit www.providerexpress.com.

For Pharmacy Provider questions please contact 1-800-613-3591 or email the pharmacy contracting team mailbox at pharmacycontracts@optum.com. For more information online you can go to www.optum.com/optumrx.html.

WellCare of Nebraska:

Physical and Behavioral Health:

Phone: 1-855-599-3814

Email: networkexpansion@wellcare.com Mail: WellCare Health Plans, Inc.

Attn: Network Development-NE

P.O. Box 31409

Tampa, FL 33633-0029

Pharmacy: PBM – CVS

CVS/caremark Provider Enrollment Line

Phone: 480-391-4623

www.caremark.com/pharminfo

MLTC is currently scheduling online provider webinars to begin in June that will include presentations from MLTC and all three Heritage Health plans. More information on these webinars will be available on the Heritage Health website at: http://dhhs.ne.gov/heritagehealth. The Heritage Health website also includes additional information on the Heritage Health program, including a fact sheet and answers to frequently asked questions.

If you have questions regarding this bulletin, please contact Tammy Usrey at Tammy.Usrey@Nebraska.gov.